Appl. No. 10/540,803 Amdt. dated September 18, 2006 Reply to Non-Final Office Action of June 19, 2006

Amendments to the Claims:

· This listing of claims will replace all prior versions and listings of claims in the application.

Listing of Claims:

- 1.-4. (Cancelled).
- 5. (Currently amended) A method of reducing the risk of insulin-induced preventing hypoglycemia in a diabetes patient who is being treated with insulin, which method comprises administering a basal replacement dose of glucagon to a patient and who is not suffering hypoglycemic symptoms which method comprises administering glucagon to said patient in an amount therapeutically effective for the prevention of hypoglycemia.
- 6. (*Original*) The method of claim 5, wherein said glucagon is administered simultaneously with, or within one minute to four hours after said patient has last been administered insulin.
 - 7. (Cancelled).
- 8. (Currently amended) The method of claim 5 2, wherein said insulin is administered parenterally and said glucagon is administered by a route of administration selected from the group consisting of oral administration, ocular administration, nasal administration, pulmonary administration, parenteral administration, and transdermal administration parenterally by a subcutaneous, intramuscular, or intravenous route.
- 9. (Currently amended) The method of claim 5 8, wherein the patient has a blood glucose level of from 70 110 mg/dL said glucagon is administered transdermally.
- 10. (Original) The method of claim 8, wherein said glucagon is a glucagon with a longer duration of action.
 - 11. (Cancelled).

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- 12. (Original) The method of claim 8, wherein said glucagon is contained in a liposomal formulation.
- 13. (Original) The method of claim 8, wherein said glucagon is contained in a microsphere.
 - 14.-17. (Cancelled).
- 18. (New) The method of claim 5 wherein the basal replacement dose of glucagon results in a plasma glucagon level in the range achieved by intravenous infusion of glucagon at a rate that is not less than 0.10 ng/kg/min and not more than 3.00 ng/kg/min.
 - 19. (New) The method of claim 5 wherein glucagon is administered daily at bedtime.
- 20. (New) The method of claim 5 wherein the patient has a has a blood glucose level that is not less than 50 mg/dL.
- 21. (New) A method of reducing the risk of insulin-induced hypoglycemia in a diabetes patient who is being treated with insulin, which method comprises administering glucagon to the patient as part of a diabetes treatment regimen, wherein glucagon is administered daily at bedtime, wherein said patient is not suffering hypoglycemic symptoms.
- 22. (New) The method of claim 21 wherein the patient has a blood glucose level of from 70 110 mg/dL.
- 23. (New) The method of claim 21 wherein the patient has a has a blood glucose level that is not less than 50 mg/dL.
- 24. (New) The method of claim 21 in which a dose of glucagon is administered that results in a plasma glucagon level in the range achieved by intravenous infusion of glucagon at a rate that is not less than 0.10 ng/kg/min and not more than 5.00 ng/kg/min.
- 25. (*New*) The method of claim 24 in which a dose of glucagon is administered that results in a plasma glucagon level in the range achieved by intravenous infusion of glucagon at a rate that is not less than 0.10 ng/kg/min and not more than 3.00 ng/kg/min.